## **Department of Natural Resources**

Application for Student Internship Program

## Mail Applications to:

Internship Coordinator
Department of Natural Resources
Human Resources Services C-3
580 Taylor Avenue
Annapolis, MD 21401



Applying For:(Title of Internship) – (A separate application is required for each internship unless otherwise indicated.)
Name:
Last First MI
Address: Street City County State Zip
Home Phone: ( )Work/School Phone: ( )
E-mail:
Social Security Number:
Education
High School:JuniorSenior
College:FreshmanSophomoreJuniorSeniorGraduate
Grade Point Average:
Name of School:
Address:
Major Course of Study:
Minor Course of Study:(if applicable)

Education Continued			
Total number of credits completed:	Credits in Progress: _		
Please list relevant courses:			
Course Title	Credits		
ob Number 1 (Your current or most recent position)			
Name of Employer:	Employer's Address (Street, City, State, Zip Code)		
Type of Business:	Supervisor's Name and Phone Number		
Your Job Title:	Do you supervise other employees?	Job Titles of Those You Supervise:	
	Yes No How Many?		
Dates of Employment: (From – To [00/00/0000])	Is your position considered full-time? \text{ How many hours do you work per week.}		
Job Duties:	now many nous do you work per wee	5K4	
Reason For Leaving:			
Can we contact your employer?			

## Job Number 2 (Your next most recent position)

Type of Business:	Supervisor's Name and Phone Number	
Your Job Title:	Do you supervise other employees?  Yes No How Many?	Job Titles of Those You Supervise:
Dates of Employment: (From – To [00/00/0000])	Is your position considered full-time? Yes No  How many hours do you work per week?	
Job Duties:		

## Job Number 3 (Your next most recent position)

Name of Employer:	Employer's Address (Street, City, State, Zip Code)			
Type of Business:	Supervisor's Name and Phone Number			
Your Job Title:	Do you supervise other employees?  Yes No How Many?	Job Titles of those you Supervise:		
Dates of Employment: (From – To [00/00/0000])	Is your position considered full-time? Yes No			
	How many hours do you work per wee	ek?		
Job Duties:				
Reason For Leaving:				
Can we contact your employer?				

How did you find out about this recruitment? Please check the appropriate space(s).				
	DNR Website			
	Other Website	(List)		
	Career Center	_(Office Location)		
	Job Fair	_(Location)		
	DNR Employee	_(List)		
	Other	_(List)		
<b>FOR</b> Birth	LICANTS TO PROVIDE, VOLUNTARILY, THE FOLLOWING INFORMATION. THIS INFORMATION. THE PROPERTY OF THE PROPERTY	MATION WILL BE USED		
If you are a foreign national residing in the U.S, what is your status?  RACE/ETHNIC IDENTIFICATION – PLEASE CHECK ALL THAT APPLY				
Sele	ct one or more of the following racial/ethnic categories:			
1.	<ol> <li>American Indian or Alaska Native (A person having origins I any of the original peoples of North or South America, including Central America, and who maintains tribal affiliations or community attachment.</li> </ol>			
	<ol> <li>Asian (A person having origin in any of the original peoples of the Far East, Southeast Asia, or Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.)</li> </ol>			
3.	Black or African American (A person having origins in any of the black racial gro	ups of Africa.)		
4.	Native Hawaiian or other Pacific Islander (A person having origins in the origin Guam, Samoa, or other Pacific Islands.)	nal peoples of Hawaii,		
5.	White (A person having origins in any of the original peoples of Europe, the Middl	e East, or North Africa.)		
6.	Hispanic or Latino (A person of Cuban, Mexican, Puerto Rican, South or Centrother Spanish culture or origin, regardless of race.)	al American , or		